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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/625749
	Filing Date	7/22/2003
	First Named Inventor	Oystein Fodstad
	Art Unit	1614
	Examiner Name	Gailene Gabel
	Attorney Docket Number	08966.0031USRE

To: Commissioner for Patents
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Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

The client has assented to our withdrawal.

APPROVED

Mark E. Deffner
SPTO, TC1600
12/29/04

CORRESPONDENCE ADDRESS

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Signature	<i>Mark E. Deffner</i>				
Name	Mark E. Deffner	Registration No.	55,103		
Date	12/09/2004	Telephone No.	612.332.5300		

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